UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

SEC Mall Processing

NOTICE OF SALE OF SECURITIES

PURSUANT TO REGULATION D, MAY 15 2008

PURSUANT TO REGULATION D, MAY 15 2008 SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTRONINGTON, DC

THOMSON REUTERS

PROCESSED

OMB APPROVAL

OMB Number: 3235-0076 Expires: May 31, 2008 Estimated average burden hours per form......16.00

SEC USE ONLY					
Prefix		Serial			
DATE RECEIVED					
	,				

Name of Offering (☐ check if this is an amendment and name has changed, and indicate change.)						
Offering of convertible secured promissory notes (the "Notes"), warrants to purchase equity securities of the Issuer (the "Warrants") and the underlying equity securities issuable upon conversion of the Notes and exercise of the warrants.						
Filing Under (Check box(es) that apply):	☐ Rule 504	☐ Rule 505	☒ Rule 506	☐ Section 4(6)	ULOE	
Type of Filing:		New Filing	X	Amendment		
	A. BASIC	IDENTIFICATION I	DATA	· · ·		
1. Enter the information requested about	t the issuer	•				
Name of Issuer (check if this is an ame	ndment and name has changed, ar	nd indicate change.)				
SkyPilot Networks, Inc.						
Address of Executive Offices	(Number and Stree	t, City, State, Zip Code	Telephone Number	(ln		
2055 Laurelwood Road, 2nd Floor, Sant	(408) 764-8000) (880)J 2018) (870 <u>)</u> 201				
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)						Telephone Number
Same as above			(408) 764-8000	(408) 764-8000 O8048146		
Brief Description of Business Wireless application software				_ 000	40140	
Type of Business Organization						
☑ corporation ☐ limited partnership, already formed			□ other (please specify):			
☐ business trust	☐ limited partnership, to be for	med				
Actual or Estimated Date of Incorporation	or Organization:	Month 12	Year 00	🖸 Actual 💢	☐ Estimated	
Jurisdiction of Incorporation or Organizati	Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: DE CN for Canada; FN for other foreign jurisdiction)					

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain al information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendinced not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose,or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	Promoter	☑ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
•	t name first, if individual)				
Galanos, Greg	sidence Address (Number and	Pt Cit- Ct 71- C-1-\			
	•	Street, City, State, Zip Code) Street, Suite 210, Boulder, CC	D 80302		
Check	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or
Box(es) that					Managing Partner
Apply:	t name first, if individual)				
Marquardt, Da					
	sidence Address (Number and	Street, City, State, Zip Code)			
		uite 101, Menlo Park, CA 940	025		
Check Boxes that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
· · · · · · · · · · · · · · · · · · ·	t name first, if individual)				
		oius Technology Ventures VI,	, L.P.		· · · · · · · · · · · · · · · · · · ·
1050 Walnut S	idence Address (Number and treet, Suite 210, Boulder, CO				
Check Boxes that Apply:	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
	t name first, if individual) dividuals affiliated with Aug	ust Capital VI, L.P.		•	
	idence Address (Number and				
	Road, Suite 101, Menlo Par	<u> </u>			
Check Boxes that Apply:	Promoter	☑ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
•	t name first, if individual)	ana Bulwata Canital			
	dividuals affiliated with Inve				
	f the Americas, New York, N				
Check Boxes that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Las	t name first, if individual)				
Gordon, Paul					
	idence Address (Number and	Street, City, State, Zip Code) od Road, 2 nd Floor, Santa Cla	oro CA 95054		
Check Boxes	Promotes	Beneficial Owner	Executive Officer	☐ Director	General and/or
that Apply:	- Fromotes	Deficicial Owner	Executive Officer	□ Director	Managing Partner
Full Name (Las	t name first, if individual)				
Business or Res	idence Address (Number and	Street, City, State, Zip Code)			
Check Box(es) that Apply:	☐ Promote:	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Las	t name first, if individual)				
Duciness on Des	idanoa Addrass (Alumba	Street, City, State, Zip Code)			
Dusiness of Res	idence Address (Mulliper and	Succi, City, State, Zip Code)			

				В	. INFURM	IA HUN AB	OUI OFFE	KING				
1.	Has the issuer sold,	or does the iss	uer intend to	-				?g under ULŒ			Yes N	o <u> </u>
2.	2. What is the minimum investment that will be accepted from any individual?								\$ Not a	pplicable		
3.	3. Does the offering permit joint ownership of a single unit?									Yes <u></u> ✓ N	o	
4.	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forththe information for that broker or dealer only. None											
Full	Name (Last name fir	st, if individua	ıl)									
Busi	ness or Residence A	ddress (Numbe	er and Street,	City, State	, Zip Code)							
Nam	e of Associated Brok	ker or Dealer						· · · · · · · · · · · · · · · · · · ·				
	es in Which Person L		-									
-	ck "All States" or ch	eck individual	States)									
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	IHII	{ID]
(IL)	INI	[lA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT	[NE]	[NV]	INHI	[נמן	[NM]	ĮNYĮ	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	ĮTXJ	ועדן	ĮVTJ	[VA]	[VA]	[WV]	[WI]	[WY]	[PR]
Full	Name (Last name fir	st, if individus	ıl)									
Busi	ness or Residence A	ddress (Numbe	er and Street,	City, State	, Zip Code)							
Nam	e of Associated Brok	e or Dealer										
State	s in Which Person L	isted Has Soli	cited or Inter	ds to Solic	it Purchaser	s						
(Che	ck "All States" or ch	eck individual	States)									All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
IM T) [NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	INDI	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	ĮVTĮ	ĮVΑĮ	[VA]	ĮWVĮ	[WI]	[WY]	[PR]
Fuli	Name (Last name fir	st, if individua	al)									
Business or Residence Address (Number and Street, City, State, Zip Code)												
Name of Associated Broker or Dealer												
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers												
(Check "All States" or check individual States)												
[AL]	[AK]	[AZ]	[AR]	[CA]	(CO)	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[1L]	[N]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	JMAJ	[MI]	[MN]	[MS]	[MO]
[MT	l [NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	INC	INDI	ЮНІ	[OK]	[OR]	[PA]
IRII	ISCI	ISDI	ITNI	ITXI	IUTI	IVTI	IVAI	IVAI	IWVI	IWII	(WY)	IPRI

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of t	sold. Enter "0" if answer he securities offered for ex-	er is "none" or "zero." If the
	Type of Security	Aggregate	Amount Already
	.,,,,,	Offering Price	Sold
	Debt	_	s <u> </u>
	Equity	s <u> </u>	s
•	Common Preferred	<u> </u>	<u> </u>
	Convertible Securities (including warrants)	\$ <u>3,541,067.00</u>	\$ <u>3,455,672.25</u>
	Partnership Interests		\$0
	Other (Specify)	\$0	\$0
	Total	\$ <u>3,541,067.00</u>	S <u>3,455,672.25</u>
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number	Aggregate
		Investors	Dollar Amount
			of Purchases
	Accredited Investors	15	S 3,455,672.25
	Non-accredited Investors	0	S0
	Total (for filings under Rule 504 only)	0	s0
	Answer also in Appendix, Column 4, if filing under ULOE.		·
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C- Question 1.	Type of	Dollar Amount
		Security	Sold
	Type of Offering	Security	5014
	Rule 505		\$0
	Regulation A.		s <u>0</u>
	Rule 504		s <u>0</u>
	Total		\$0
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the		<u> </u>
٠,	securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		S0
	Printing and Engraving Costs		S0
	Legal Fees	1 2	S <u>45,000.00</u>
	Accounting Fees	. 🗆	S0
	Engineering Fees		s <u> </u>
	Sales Commissions (specify finders' fees separately)		S <u> </u>
	Other Expenses (Identify) blue sky filing fees.	12	\$300.00
	Total	(2)	\$ 45,300.00
		<u></u>	- 12,00,00

C. OFFERING PRICE, NUMBER OF IN	VESTORS, EXPENSES AND	USE OF PROCEEDS	
 Enter the difference between the aggregate offering price given in res in response to Part C – Question 4.a. This difference is the "adjusted 			\$3,495,767
5. Indicate below the amount of the adjusted gross proceeds to the issuer use If the amount for any purpose is not known, furnish an estimate and chapayments listed must equal the adjusted gross proceeds to the issuer set for	neck the box to the left of the e	stimate. The total of the	
		Payment to Officers,	Payment To
		Directors, & Affiliates	Others
Salaries and fees		□ s <u>o</u>	□ s <u>0</u>
Purchase of real estate	***************************************	□ s <u>0</u>	□ s <u> </u>
Purchase, rental or leasing and installation of machinery and equipment		□ s <u>0</u>	□ s <u>o</u>
Construction or leasing of plant buildings and facilities		□ s 0	□ so
Acquisition of other businesses (including the value of securities involved in t			
in exchange for the assets or securities of another issuer pursuant to a merger). Repayment of indebtedness		□ s o	·
Working capital		□ s0	□ s <u> </u>
		□ s <u>0</u>	⊠ s <u>3,495,767</u>
Other (specify):	····	□ s <u>o</u>	□ s <u>o</u>
		□ s <u>0</u>	□ s <u>0</u>
Column Totals		□ s <u>0</u>	⋈ \$ 3,495,767
Total Payments Listed (column totals added)			3,495,767
D. FEDE	RAL SIGNATURE		
The issuer had duly caused this notice to be signed by the undersigned duly au an undertaking by the issuer to furnish to the U.S. Securities and Exchange Conon-accredited investor pursuant to paragraph (b)(2) of Rule 502.			
Issuer (Print or Type)	Signature		Date
SkyPilot Networks, Inc.	and D. Tom		May 14, 2008
Name of Signer (Print or Type)	Title of Signer (Print or Type)	0	
Mark P. Tanoury	Secretary		

ATTENTION
Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)